

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below, next to my name,

I believe I am the original, first and sole inventor. (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD AND APPARATUS FOR CONTROLLING POWER FACTOR CORRECTION

as described and claimed in the specification which

♦ is attached hereto

☐ was filed on _____ as Application Serial No. _____ or Express Mail No. _____ as Serial No. not yet known and was amended on _____ (if applicable).

☐ was set forth in PCT International Application No. _____ which was filed on _____ and as amended under PCT Article 19 on _____ (if any).

I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the U. S. Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, Section 1.56.

☐ In compliance with this duty, there is attached an Information Disclosure Statement. 37 CFR 1.97.

I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate or §365(a) of any PCT International application(s) which designated at least one country other than the United States, listed below and have also identified below any foreign application for patent or inventor's certificate, or PCT International application, having a filing date before that of the application on which priority is claimed.

☒ No such Applications have been filed.

☐ Such Applications have been filed as follows:

Prior Foreign Application(s)

Priority Claimed

Application Number

Country

Day/Month/Year Filed

Yes

No

☐☐

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

☒ No such Applications have been filed.

☐ Such Applications have been filed as follows:

Provisional Application(s)

Priority Claimed Under 35 USC 119(e)

Application Number

Day/Month/Year Filed

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code

Attorney Docket No. MP0403

of Federal Regulations, §1.56 which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:

- ☒ No such Applications have been filed.
☐ Such Applications have been filed as follows:

Application Serial No.

Filing Date

Status
(Patented, Pending, Abandoned)

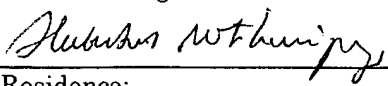
I hereby appoint

Eric B. Janofsky (Registration No. 30,759).

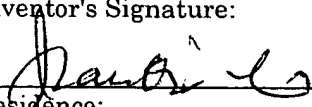
as my attorneys with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected herewith. Send all correspondence to

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I hereby declare that I have reviewed and understand the contents of this Declaration, and that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

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